

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		64151	12-14-99
O.L.P.E. CLASSIFIER		7	12-27-99
FORMALITY REVIEW		1-32	1-11-00
RESPONSE FORMALITY REVIEW		71022	5-1-00

09453319

INDEX OF CLAIMS

Rejected _____ N _____ Non-elected
 Allowed _____ I _____ Interference
 (Through numeral) _____ A _____ Appeal
 Restricted _____ O _____ Objected

Claim	Final	Original
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If more than 150 claims or 10 actions
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